

**COMBINED DECLARATION AND POWER OF ATTORNEY
(ORIGINAL, DESIGN, NATIONAL STAGE OF PCT)**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name, I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Title: **WORN ARTICLE AND METHOD FOR PRODUCING THE SAME**

the specification of which

- (a) _____ is attached hereto.
- (b) _____ was filed on _____ as _____ Serial No. _____ or _____ Express Mail No. _____, as Serial No. not yet known, and was amended on _____ (if applicable).
- (c) was described and claimed in PCT International Application No. PCT/JP2004/019175 filed on December 22, 2004 and amended on _____ (if any).

I hereby state that I have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose to the Patent and Trademark Office all information known to me to be material to patentability as defined in 37 C.F.R. §1.56.

PRIORITY CLAIM

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed.

- (d) _____ no such application have been filed.
- (e) such applications have been filed as follows.

**EARLIEST FOREIGN APPLICATION(S), IF ANY FILED WITHIN 12 MONTHS
(6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION**

COUNTRY	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC §119		
JP	2003-426048	24/12/2003	<input checked="" type="checkbox"/>	Yes	No
				Yes	No
				Yes	No

Attorney Docket No.: YMMRP0105US

PATENT (US)

POWER OF ATTORNEY

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) associated with the Customer Number listed below to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

43076

Direct Correspondence To:

The address associated with the above-mentioned customer number.

Direct Telephone Calls To:

Name: Mark D. Saralino, Esq.
Tel. No: 216/621-1113
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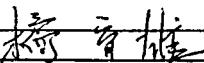
The undersigned to this declaration and power of attorney hereby authorizes the U.S. attorney(s) named herein to accept and follow instruction from

Name(s) of authorized representation(s): Yoshinobu Yamamura, Yamamura Patent Office
Address: Koei Bldg., 2-2, Ekimae 3-chome, Ibaraki-shi, Osaka 567-0888, Japan

as to any actions to be taken in the Patent and Trademark Office regarding this application without direct communication between the U.S. attorney(s) and the undersigned. In the event of a change in the person(s) from whom instructions may be taken, the U.S. attorney(s) will be so notified by the undersigned.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued therein.

Full name of sole or first inventor Ikuo TACHIBANA

Inventor's signature 

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Full name of second inventor

Inventor's signature _____

Date _____ Country of Citizenship _____

Residence _____

Post Office Address _____

Full name of third inventor

Inventor's signature _____

Date _____ Country of Citizenship _____

Residence _____

Post Office Address _____

CHECK FOR ANY OF THE FOLLOWING ADDED PAGE(S) WHICH
FORM A PART OF THIS DECLARATION

- Signature for fourth and subsequent joint inventors. Number of pages added _____.
 Added page to combined declaration and power of attorney for divisional, continuation, or continuation-in-part (CIP) application.
 This declaration ends with this page.